



ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA	76385	
O.I.P.E. CLASSIFIER		19	10/00
FORMALITY REVIEW	for	852	11-02-00
RESPONSE FORMALITY REVIEW	request	925	03-26-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)..... Canceled A Appeal
+ Restricted O Objected

Claim	Date
Final	
Original	
1	1-5/03
2	7-9/03
3	11/14/03
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Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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